Guidelines for Management of MRSA/VRE Infections							
		Ambulatory Care	Communal Care		Other		
	Long-Term Care	Setting	Setting		(i.e., Schools,		
	(i.e., Long-Term	(i.e., Dialysis	(i.e., Open Ward,		Day Care,		
	Care Facilities,	Settings, Clinics	Mental Health		Assisted Living,		
	Rehab Centers,	and Outpatient	and Chemical		Adult Day-Care		
<b>Acute Care</b>	Swing Bed Units)	Day Surgery)	Dependency)	Home Care	Center, etc.)		
		Room As	ssignment*				
		1 <sup>st</sup> (	Choice				
Private room with	Private room with	Private room with	Private room with				
private handwashing	private handwashing	private handwashing	private handwashing				
and toilet facilities. A	and toilet facilities. A	and toilet facilities. A	and toilet facilities. A				
private room is	private room is	private room is	private room is		Clients/students		
essential for patients	essential for patients	essential for patients	essential for patients		infected or colonized		
that are unable to	that are unable to	that are unable to	that are unable to	Not applicable in home	who are unable to		
contain body	contain body	contain body	contain body	care. Not necessary to	control secretions,		
secretions or	secretions or	secretions or	secretions or	rearrange sleeping	excretions or drainage		
excretions (i.e., large	excretions (i.e., large	excretions (i.e., large	excretions (i.e., large	arrangement unless	should be considered		
draining wound,	draining wound, cough,	draining wound, cough,	draining wound, cough,	there are large open	for exclusion from		
cough, tracheostomy,	tracheostomy,	tracheostomy,	tracheostomy,	wounds or drainage	activities where direct		
diapered & incontinent).	diapered & incontinent).	diapered & incontinent).	diapered & incontinent).	that cannot be contained.	contact may occur. (i.e., wrestling).		
incontinent).	incontinent).		Choice	Contained.	wiesung).		
Cohort persons with	Cohort persons with	Cohort persons with	Cohort persons with				
the same organisms	the same organisms	the same organisms	the same organisms				
(MRSA, VRE)	(MRSA, VRĔ)	(MRSA, VRĚ)	(MRSA, VRĔ)				
colonized/infected	colonized/infected	colonized/infected	colonized/infected				
patients if private	patients if private room	patients if private room	patients if private room				
room not available.	not available. <b>Do not</b>	not available. <b>Do not</b>	not available. <b>Do not</b>				
Do not place people	place people with	place people with	place people with				
with MRSA and VRE	MRSA and VRE	MRSA and VRE	MRSA and VRE				
<u>together</u> .	together.	together.	together.	Not Applicable	Not Applicable		

<sup>\*</sup>VRE: Careful consideration needs to be made for VRE placement because of role of VRE in environmental contamination.

	Guidelines for Management of MRSA/VRE Infections							
Acute Care	Long-Term Care (i.e., Long-Term Care Facilities, Rehab Centers, Swing Bed Units)	Ambulatory Care Setting (i.e., Dialysis Settings, Clinics and Outpatient Day Surgery)	Communal Care Setting (i.e., Open Ward, Mental Health and Chemical Dependency)	Home Care	Other (i.e., Schools, Day Care, Assisted Living, Adult Day-Care Center, etc.).)			
	, ,		hoice	ı	, , , ,			
When a private room or cohorting cannot be achieved, place the infected/colonized patient with another patient who does not have underlying immunocompromising illness, open wounds, or indwelling devices.	When a private room or cohorting cannot be achieved, place the infected/colonized person with another person who does not have underlying immunocompromising illness, open wounds, or indwelling devices.	When a private room or cohorting cannot be achieved, place the infected/colonized patient with another patient who does not have underlying immunocompromising illness, open wounds, or indwelling devices.  Schedule patient at the end of the day if possible. Place patient in room; avoid waiting room. Decrease areas of contamination by bringing services to patient (i.e., EKG, Lab, etc.)	When a private room or cohorting cannot be achieved, place the infected/colonized person with another person who does not have underlying immunocompromising illness, open wounds, or indwelling devices.	Not Applicable  Schedule home visit at the end of the day if possible.	Not Applicable  Not Applicable			

	Guidelines for Management of MRSA/VRE Infections						
		Ambulatory Care	Communal Care		Other		
	Long-Term Care	Setting	Setting		(i.e., Schools,		
	(i.e., Long-Term	(i.e., Dialysis	(i.e., Open Ward,		Day Care,		
	Care Facilities,	Settings, Clinics	Mental Health		Assisted Living,		
	Rehab Centers,	and Outpatient	and Chemical		Adult Day-Care		
Acute Care	1	-		Home Care			
Acute Care	Swing Bed Units)	Day Surgery)	Dependency)	nome Care	Center, etc.)		
			/Hand Hygiene*				
Employee: Perform	Employee: Perform	Employee: Perform	Employee: Perform	Employee: Perform			
hand hygiene before	hand hygiene before	hand hygiene before	hand hygiene before	hand hygiene before			
and after	and after	and after	and after	and after	Employee: Perform		
environmental contact	environmental contact	environmental contact	environmental contact	environmental contact	hand hygiene before		
with person or glove	with person or glove	with person or glove	with person or glove	with person or glove	and after environmental		
removal. Utilize an	removal. Utilize an	removal. Utilize an	removal. Utilize an	removal. Utilize an	contact with person or		
antimicrobial soap	antimicrobial soap (i.e.,	antimicrobial soap (i.e.,	antimicrobial soap (i.e.,	antimicrobial soap (i.e.,	glove removal. Utilize		
(i.e., soaps or agents	soaps or agents	soaps or agents	soaps or agents	soaps or agents	an antimicrobial soap		
containing lodophor,	containing lodophor,	containing lodophor,	containing lodophor,	containing lodophor,	(i.e., soaps or agents		
chlorhexidine	chlorhexidine	chlorhexidine	chlorhexidine	chlorhexidine	containing lodophor,		
gluconate, PCMX or	gluconate, PCMX or	gluconate, PCMX or	gluconate, PCMX or	gluconate, PCMX or	chlorhexidine gluconate,		
triclosan) and water	triclosan) and water for	triclosan) and water for	triclosan) and water for	triclosan) and water for	PCMX or triclosan) and		
for at least 15	at least 15 seconds	at least 15 seconds	at least 15 seconds	at least 15 seconds	water for at least 15		
seconds when hands	when hands are visibly	when hands are visibly	when hands are visibly	when hands are visibly	seconds when hands		
are visibly soiled or	soiled or contaminated	soiled or contaminated	soiled or contaminated	soiled or contaminated	are visibly soiled or		
contaminated with	with blood and body	with blood and body	with blood and body fluids.	with blood and body fluids.	contaminated with blood		
blood and body fluids.  If hands are not	fluids.  If hands are not visibly	fluids.  If hands are not visibly	If hands are not visibly	If hands are not visibly	and body fluids.		
visibly soiled, use an	soiled, use an alcohol-	soiled, use an alcohol-	soiled, use an alcohol-	soiled, use an alcohol-	If hands are not visibly		
alcohol-based hand	based hand rub for	based hand rub for	based hand rub for	based hand rub for	soiled, use an alcohol-		
rub for routine	routine	routine	routine	routine	based hand rub for		
decontamination of	decontamination of	decontamination of	decontamination of	decontamination of	routine decontamination		
hands.	hands.	hands.	hands.	hands.	of hands.		
Do not touch	Do not touch	Do not touch	Do not touch	Do not touch	Do not touch		
environmental	environmental	environmental	environmental	environmental	environmental		
surfaces after	surfaces after	surfaces after	surfaces after	surfaces after	surfaces after		
washing/	washing/	washing/	washing/	washing/	washing/		
decontaminating	decontaminating	decontaminating	decontaminating	decontaminating	decontaminating		
hands.	hands.	hands.	hands.	hands.	hands.		
nanus.	Hallus.	nanus.	nanus.	าเลเนง.	nanus.		

	Guidelines for Management of MRSA/VRE Infections							
Acute Care	Long-Term Care (i.e., Long-Term Care Facilities, Rehab Centers, Swing Bed Units)	Ambulatory Care Setting (i.e., Dialysis Settings, Clinics and Outpatient Day Surgery)	Communal Care Setting (i.e., Open Ward, Mental Health and Chemical Dependency)	Home Care	Other (i.e., Schools, Day Care, Assisted Living, Adult Day-Care Center, etc.)			
See Appendix A.	See Appendix A.	See Appendix A.	See Appendix A.	See Appendix A. Use paper towels rather than family towels. Antimicrobial soap should be available in the home and family instructed on use.	See Appendix A.			
Patient: Instruct person to wash hands with an antimicrobial agent after using the restroom, before eating, before leaving the room or mingling with others. Verify patient's ability to wash hands.	Patient: Instruct person to wash hands with an antimicrobial agent after using the restroom, before eating, before leaving the room or mingling with others. Verify patient's ability to wash hands.	Patient: Instruct person to wash hands with an antimicrobial agent after using the restroom, before eating, before leaving the room or mingling with others. Verify patient's ability to wash hands.	Patient: Instruct person to wash hands with an antimicrobial agent after using the restroom, before eating, before leaving the room or mingling with others. Verify patient's ability to wash hands.	Patient: Instruct person to wash hands with an antimicrobial agent after using the restroom, before eating, before leaving the room or mingling with others. Verify patient's ability to wash hands.	Client: Instruct or assist clients to wash hands after using restroom, before eating, before and after activities and before going home.			
A waterless alcohol- based hand rub appropriate for hand disinfection may be used if obvious soiling is absent.	A waterless alcohol- based hand rub appropriate for hand disinfection may be used if obvious soiling is absent.	A waterless alcohol- based hand rub appropriate for hand disinfection may be used if obvious soiling is absent.	A waterless alcohol- based hand rub appropriate for hand disinfection may be used if obvious soiling is absent.	A waterless alcohol- based hand rub appropriate for hand disinfection may be used if obvious soiling is absent.	A waterless alcohol- based hand rub appropriate for hand disinfection may be used if obvious soiling is absent.			

	Guidelines for Management of MRSA/VRE Infections							
		Ambulatory Care	Communal Care		Other			
	Long-Term Care	Setting	Setting		(i.e., Schools,			
	(i.e., Long-Term	(i.e., Dialysis	(i.e., Open Ward,		Day Care,			
	Care Facilities,	Settings, Clinics	Mental Health		Assisted Living,			
	1		and Chemical		•			
	Rehab Centers,	and Outpatient			Adult Day-Care			
Acute Care	Swing Bed Units)	Day Surgery)	Dependency)	Home Care	Center, etc.)			
Visitors: Visitors								
should wash/								
decontaminate hands	<u>Visitors</u> : Visitors	<u>Visitors</u> : Visitors	<u>Visitors</u> : Visitors					
with antimicrobial	should wash/	should wash/	should wash/					
product before	decontaminate hands	decontaminate hands	decontaminate hands	<u>Visitors</u> : Visitors				
contact with person.	with antimicrobial	with antimicrobial	with antimicrobial	should wash/				
Visitors providing	product before contact	product before contact	product before contact	decontaminate hands				
direct care should	with person. Visitors	with person. Visitors	with person. Visitors	with antimicrobial				
follow the same	providing direct care	providing direct care	providing direct care	product before contact				
guidelines for barriers	should follow the same	should follow the same	should follow the same	with person. Visitors				
and hand hygiene	guidelines for barriers	guidelines for barriers	guidelines for barriers	providing direct care				
procedures outlined	and hand hygiene	and hand hygiene	and hand hygiene	should follow the same				
for health-care	procedures outlined for	procedures outlined for	procedures outlined for	guidelines for barriers				
workers. Visitors not	health-care workers.	health-care workers.	health-care workers.	and hand hygiene				
providing direct care	Visitors not providing	Visitors not providing	Visitors not providing	procedures outlined for				
should be instructed	direct care should be	direct care should be	direct care should be	health-care workers.	<u>Visitors</u> : Visitors			
to	instructed to	instructed to	instructed to	Visitors not providing	providing direct care			
wash/decontaminate	wash/decontaminate	wash/decontaminate	wash/decontaminate	direct care should be	should follow the same			
hands with	hands with	hands with	hands with	instructed to wash	guidelines for barriers			
antimicrobial soap at	antimicrobial soap at	antimicrobial soap at	antimicrobial soap at	hands with	and hand hygiene			
the end of their visit in	the end of their visit in	the end of their visit in	the end of their visit in	antimicrobial soap at	procedures outlined for			
a person's room.	a person's room.	a person's room.	a person's room.	the end of their visit.	health-care workers.			
A waterless alcohol- based hand rub	A waterless alcohol- based hand rub	A waterless alcohol-	A waterless alcohol-	A waterless alcohol-	A waterless alcohol-			
		based hand rub	based hand rub	based hand rub	based hand rub			
appropriate for hand	appropriate for hand	appropriate for hand	appropriate for hand	appropriate for hand	appropriate for hand			
disinfection may be	disinfection may be used in the absence of	disinfection may be used in the absence of	disinfection may be used in the absence of	disinfection may be used in the absence of	disinfection may be used in the absence of			
used in the absence of obvious soiling.				obvious soiling.	obvious soiling.			
Direct contact of	obvious soiling. Direct contact of	obvious soiling. Direct contact of	obvious soiling. Direct contact of	obvious solillig.	Obvious solling.			
visitors with other	visitors with other	visitors with other	visitors with other					
persons should be	persons should be	persons should be	persons should be					
discouraged.	discouraged.	discouraged.	discouraged.					
uiscoui ayeu.	uiscourayeu.	uiscourayeu.	uiscourayed.					

<sup>\*</sup>Facilities may consider group hand hygiene before group activities.

	Guidelines for Management of MRSA/VRE Infections							
Acute Care	Long-Term Care (i.e., Long-Term Care Facilities, Rehab Centers, Swing Bed Units)	Ambulatory Care Setting (i.e., Dialysis Settings, Clinics and Outpatient Day Surgery)	Communal Care Setting (i.e., Open Ward, Mental Health and Chemical Dependency)	Home Care	Other (i.e., Schools, Day Care, Assisted Living, Adult Day-Care Center, etc.)			
		Contact F	Precautions					
Gloves: (clean, nonsterile) should be worn upon entering the patient room*. Gloves should be changed between multiple procedures on the same person if they become contaminated.	Gloves: (clean, nonsterile) should be worn upon entering the patient room*. Gloves should be changed between multiple procedures on the same person if they become contaminated.	Gloves: (clean, nonsterile) should be worn upon entering the patient room*. Gloves should be changed between multiple procedures on the same person if they become contaminated.	Gloves: (clean, nonsterile) should be worn upon entering the patient room*. Gloves should be changed between multiple procedures on the same person if they become contaminated.	Gloves: (clean, nonsterile) should be worn when treating or having close contact with a person that has an active infection, is incontinent, or has wound exudate that cannot be contained. Gloves should be changed between multiple procedures on the same person if they become contaminated. For people who are mobile and socially interactive, the need for the caregiver to wear gloves can be limited to situations involving direct contact with stool or other body substances.	Gloves: should be worn when in contact with body fluids, excretions or secretions.			

<sup>\*</sup>Room means immediate care environment.

	Guidelines for Management of MRSA/VRE Infections							
Acute Care	Long-Term Care (i.e., Long-Term Care Facilities, Rehab Centers, Swing Bed Units)	Ambulatory Care Setting (i.e., Dialysis Settings, Clinics and Outpatient Day Surgery)	Communal Care Setting (i.e., Open Ward, Mental Health and Chemical Dependency)	Home Care	Other (i.e., Schools, Day Care, Assisted Living, Adult Day-Care Center, etc.)			
Hands must be washed/ decontaminated immediately after removing gloves and prior to exiting the room.*	Hands must be washed/ decontaminated immediately after removing gloves and prior to exiting the room.*	Hands must be washed/ decontaminated immediately after removing gloves and prior to exiting the room.*	Hands must be washed/ decontaminated immediately after removing gloves and prior to exiting the room.*	Hands must be washed/ decontaminated immediately after removing gloves. Gloves should be worn when cleaning the home of patient colonized/infected with VRE and when entering the homes of patient with poor hygienic practices.	Hands must be washed/ decontaminated immediately after removing gloves.			
A waterless alcohol- based hand rub appropriate for hand disinfection may be used.	A waterless alcohol- based hand rub appropriate for hand disinfection may be used.	A waterless alcohol- based hand rub appropriate for hand disinfection may be used.	A waterless alcohol- based hand rub appropriate for hand disinfection may be used.	A waterless alcohol- based hand rub appropriate for hand disinfection may be used.	A waterless alcohol- based hand rub appropriate for hand disinfection may be used.			

	Guidelines for Management of MRSA/VRE Infections							
		Ambulatory Care	Communal Care		Other			
	Long-Term Care	Setting	Setting		(i.e., Schools,			
	(i.e., Long-Term	(i.e., Dialysis	(i.e., Open Ward,		Day Care,			
	Care Facilities,	Settings, Clinics	Mental Health		Assisted Living,			
	Rehab Centers,	and Outpatient	and Chemical		Adult Day-Care			
Acute Care	Swing Bed Units)	Day Surgery)	Dependency)	Home Care	Center, etc.)			
Gowns*: clean, nonsterile fluid-								
resistant) should be	Gowns*: (clean,	Gowns*: (clean,	Gowns*: (clean,					
worn if substantial,	nonsterile fluid-	nonsterile fluid-	nonsterile fluid-					
contact with the	resistant) should be	resistant) should be	resistant) should be	Gowns*: A fluid -				
person or if the person is incontinent.	worn if <u>substantial</u> , contact with the person	worn if <u>substantial</u> , contact with the person	worn if <u>substantial</u> , contact with the person	resistant gown should be worn if there is a	Gowns*: The			
has diarrhea, has an	or if the person is	or if the person is	or if the person is	risk of soiling with body	employee should wear			
ostomy, or	incontinent, has	incontinent, has	incontinent, has	fluids (i.e. bathing,	fluid-resistant gowns if			
uncontained drainage	diarrhea, has an	diarrhea, has an	diarrhea, has an	large wound care or	there is a risk of soiling			
or secretions. Gowns	ostomy, or uncontained	ostomy, or uncontained	ostomy, or uncontained	lifting the person).	with body fluids.			
should be worn with	drainage or secretions.	drainage or secretions.	drainage or secretions.	Family/caregivers	Caregivers should wear			
anticipated contact	Gowns should be worn	Gowns should be worn	Gowns should be worn	should wear protective	protective outer			
with environmental surfaces/items.	with anticipated contact with environmental	with anticipated contact with environmental	with anticipated contact with environmental	outer garment such as	garment such as loose			
Gowns must be	surfaces/items. Gowns	surfaces/items. Gowns	surfaces/items. Gowns	a loose fitting shirt or a fluid resistant barrier.	fitting shirt or a fluid resistant barrier. The			
removed prior to	must be removed prior	must be removed prior	must be removed prior	The outer shirt can be	outer shirt can be			
leaving the person's	to leaving the person's	to leaving the person's	to leaving the person's	laundered in hot wash	laundered in hot wash			
room.	room.	room.	room.	and dryer cycles.	and dryer cycles.			
	Transport to other							
	departments when							
	medically necessary.							
	The resident may be							
	allowed to participate in activities and eat in							
Transport to other	the general dining area							
departments only	if secretion and	Transport to other	See Appendix D for	See Appendix D for				
when medically	excretions can be	departments only when	transport via	transport via	Clean clothes should be			
necessary.	contained.	medically necessary.	ambulance, vans, etc.	ambulance, vans, etc.	worn daily.			

<sup>\*</sup>Single Use (disposable or reusable gown) recommended

	Guidelines for Management of MRSA/VRE Infections						
	Long-Term Care	Ambulatory Care Setting	Communal Care Setting		Other (i.e., Schools,		
	(i.e., Long-Term Care Facilities,	(i.e., Dialysis	(i.e., Open Ward, Mental Health		Day Care, Assisted Living,		
	Rehab Centers,	Settings, Clinics and Outpatient	and Chemical		Adult Day-Care		
Acute Care	Swing Bed Units)	Day Surgery)	Dependency)	Home Care	Center, etc.)		
Gloves should be worn when transporting patients or assisting the patient outside of the room. Clean linen	Resident must have clean hands, clothing	Gloves should be worn when transporting patients or assisting the patient outside of the room. See Appendix D for					
and gown prior to	and equipment prior to	transport via	Clean clothes are to be	Clean clothes should			
leaving patient room.	leaving the room.	ambulance, vans, etc. Clean clothes are to	worn daily.	be worn daily.			
		be worn daily.					
Masks/eye protection/face shields are not routinely needed. They are indicated according to standard precautions where a splash or spray could be anticipated (i.e., suctioning, wound irrigation tracheostomy care, or actively coughing person with respiratory infection.)  Pregnant Health-	Masks/eye protection/face shields are not routinely needed. They are indicated according to standard precautions where a splash or spray could be anticipated (i.e., suctioning, wound irrigation tracheostomy care, or actively coughing patient with respiratory infection.) Pregnant Health-care	Masks/eye protection/face shields are not routinely needed. They are indicated according to standard precautions where a splash or spray could be anticipated (i.e., suctioning, wound irrigation tracheostomy care, or actively coughing person with respiratory infection.) Pregnant Health-care	Masks/eye protection/face shields are not routinely needed. They are indicated according to standard precautions where a splash or spray could be anticipated (i.e., suctioning, wound irrigation tracheostomy care, or actively coughing person with respiratory infection.) Pregnant Health-care	Masks/eye protection/face shields are not routinely needed. They are indicated according to standard precautions where a splash or spray could be anticipated (i.e., suctioning, wound irrigation tracheostomy care, or actively coughing person with respiratory infection.) Pregnant Health-care	Masks are generally not necessary in these settings.		
care Workers: No additional precautions are necessary for pregnant health-care workers or visitors.	Workers: No additional precautions are necessary for pregnant health-care workers or visitors.	Workers: No additional precautions are necessary for pregnant health-care workers or visitors.	Workers: No additional precautions are necessary for pregnant health-care workers or visitors.	Workers: No additional precautions are necessary for pregnant health-care workers or visitors.	Pregnant Staff. Visitors, etc.: No additional precautions are necessary.		

	Guide	lines for Manageme	ent of MRSA/VRE In	fections	
Acute Care	Long-Term Care (i.e., Long-Term Care Facilities, Rehab Centers, Swing Bed Units)	Ambulatory Care Setting (i.e., Dialysis Settings, Clinics and Outpatient Day Surgery)	Communal Care Setting (i.e., Open Ward, Mental Health and Chemical Dependency)	Home Care	Other (i.e., Schools, Day Care, Assisted Living, Adult Day-Care Center, etc.)
		Care of I	Equipment		
Non-critical items: (e.g., stethoscope, sphygmomanometer or thermometer) should be dedicated to a single patient and left at the bedside. Devices to be used on multiple persons (i.e., oxymetry, glucose monitoring device, electric razors, etc.) must be adequately disinfected immediately after use.	Non-critical items: (e.g., stethoscope, sphygmomanometer or thermometer) should be dedicated to a single person and left at the bedside. Devices to be used on multiple persons (i.e., oxymetry, glucose monitoring device, electric razors, etc.) must be adequately disinfected immediately after use.	Non-critical items: (e.g., stethoscope, sphygmomanometer or thermometer) should be dedicated to a single person and left at the bedside. Devices to be used on multiple persons (i.e., oxymetry, glucose monitoring device, electric razors, etc.) must be adequately disinfected immediately after use.	Non-critical items: (e.g., stethoscope, sphygmomanometer or thermometer) should be dedicated to a single person and left at the bedside. Devices to be used on multiple persons (i.e., oxymetry, glucose monitoring device, electric razors, etc.) must be adequately disinfected immediately after use.	Non-critical items:  (e.g., stethoscope, sphygmomanometer or thermometer) should be dedicated to a single person. Devices to be used on multiple people (i.e., oxymetry, glucometer, electric razors, etc.) must be adequately disinfected immediately after use prior to use on another person. In some situations the persons may be encouraged to provide their own equipment.  The home-care provider should establish a safe working surface by placing a barrier between environmental surface and the care providers supply bag and/or avoid taking the nursing bag into the home.	Healthcare items should be single use or appropriately disinfected after use.

Guidelines for Management of MRSA/VRE Infections							
		Ambulatory Care	Communal Care		Other		
	Long-Term Care	Setting	Setting		(i.e., Schools,		
	(i.e., Long-Term	(i.e., Dialysis	(i.e., Open Ward,		Day Care,		
	Care Facilities,	Settings, Clinics	Mental Health		Assisted Living		
	Rehab Centers,	and Outpatient	and Chemical		Adult Day-Care		
Acute Care	Swing Bed Units)	Day Surgery)	Dependency)	Home Care	Center, etc.)		
Acute Care	Swing Bed Offics)	Dialysis settings:	Dependency)	Home Care	Ceriter, etc.)		
		Dialysis settings.  Dialyzer reuse is					
		acceptable. The					
		external surfaces of the					
		dialyzer must be					
		disinfected before					
		transporting the					
		dialyzer from an					
		isolated patient area.					
		Standard procedures					
		concerning the					
		disinfection of dialysis					
		machines, chairs and					
		environmental surfaces					
		after each patient use					
		should be followed					
		meticulously using an					
		EPA registered					
		hospital disinfectant at					
		the appropriate dilution					
		and recommended					
		contact time. Assign					
		each patient colonized					
		or infected to their own individual supply tray					
		(tourniquet, antiseptics,					
		clamps, thermometer,					
		stethoscope, and blood					
		pressure cuff).					

	Guide	lines for Manageme	ent of MRSA/VRE In	fections				
		<b>Ambulatory Care</b>	Communal Care		Other			
	Long-Term Care	Setting	Setting		(i.e., Schools,			
	(i.e., Long-Term	(i.e., Dialysis	(i.e., Open Ward,		Day Care,			
	Care Facilities,	Settings, Clinics	Mental Health		Assisted Living,			
	Rehab Centers,	and Outpatient	and Chemical		Adult Day-Care			
Acute Care	Swing Bed Units)	Day Surgery)	Dependency)	Home Care	Center, etc.)			
Toys/other items should not be shared and should be properly disinfected after use.	Toys/other items should not be shared and should be properly disinfected after use.	Toys/other items should not be shared and should be properly disinfected after use.	Toys/other items should not be shared and should be properly disinfected after use.	Toys/other items should not be shared and should be properly disinfected after use.	Toys/other items that are contaminated by secretions/excretions (i.e. mouthing) should be properly disinfected after use.			
Dishes/Eating Utensils: Disposable dishes are unnecessary. Routine facility dishwashing procedures are adequate.	Dishes/Eating Utensils: Disposable dishes are unnecessary. Routine facility dishwashing procedures are adequate.	Dishes/Eating Utensils: Disposable dishes are unnecessary. Routine facility dishwashing procedures are adequate.	Dishes/Eating Utensils: Disposable dishes are unnecessary. Routine facility dishwashing procedures are adequate.	Dishes/Eating Utensils can be washed in a dishwasher or with a dishwashing detergent and bleach. Do not share eating utensils	Dishes/Eating Utensils can be washed in a dishwasher or with a dishwashing detergent and bleach. Do not share eating utensils.			
		Waste	Disposal					
Immediately dispose of items soiled with secretions/excretions in a plastic lined container. (Follow facility policy for waste disposal.)	Immediately dispose of items soiled with secretions/excretions in a plastic lined container. (Follow facility policy for waste disposal.)	Immediately dispose of items soiled with secretions/excretions in a plastic lined container. (Follow facility policy for waste disposal.)	Immediately dispose of items soiled with secretions/excretions in a plastic lined container. (Follow facility policy for waste disposal.)	Immediately dispose of items soiled with secretions/excretions in a plastic lined container. The bag must be securely sealed prior to disposal.	Immediately dispose of items soiled with secretions/excretions in a plastic lined container. The bag must be securely sealed prior to disposal.			
	Linen/Laundry							
Standard precautions apply for soiled linens. Daily linen changes are recommended.	Standard precautions apply for soiled linens. Daily linen changes are recommended.	Standard precautions apply for soiled linens. Daily linen changes are recommended.	Only clothing and linen soiled with secretions and excretions need to be washed separately in hot water with detergent and dried in the dryer.	Only clothing and linen soiled with secretions and excretions need to be washed separately in hot water with detergent and dried in the dryer.	Only clothing and linen soiled with secretions and excretions need to be washed separately in hot water with detergent and dried in the dryer.			

	Guide	lines for Manageme	ent of MRSA/VRE In	fections		
Acute Care	Long-Term Care (i.e., Long-Term Care Facilities, Rehab Centers, Swing Bed Units)	Ambulatory Care Setting (i.e., Dialysis Settings, Clinics and Outpatient Day Surgery)	Communal Care Setting (i.e., Open Ward, Mental Health and Chemical Dependency) Gloves should be worn when handling laundry soiled with secretions and excretions. Hand hygiene to follow glove removal.	Home Care Gloves should be worn when handling laundry soiled with secretions and excretions. Hand hygiene to follow glove removal.	Other (i.e., Schools, Day Care, Assisted Living, Adult Day-Care Center, etc.) Gloves should be worn when handling laundry soiled with secretions and excretions. Hand hygiene to follow glove removal.	
	Cleaning of Environment*					
practices for all health-care facilities should be adequate. It is essential to use an EPA-rated hospital disinfectant at the proper dilution and recommended	Standard cleaning practices for all health-care facilities should be adequate. It is essential to use an EPA-rated hospital disinfectant at the proper dilution and	Standard cleaning practices for all health-care facilities should be adequate. It is essential to use an EPA-rated hospital disinfectant at the proper dilution and	Standard cleaning practices for all health-care facilities should be adequate. It is essential to use an EPA-rated hospital disinfectant at the proper dilution and	Individuals and family care givers should be taught the importance	Employees and individuals family care givers should be taught	
contact time. Attention must be given to thorough daily cleaning of frequent contact surfaces as well as terminal cleaning upon discharge. See Appendix B.	recommended contact time. Attention must be given to thorough daily cleaning of frequent contact surfaces as well as terminal cleaning upon discharge. See Appendix B.	recommended contact time. Attention must be given to thorough daily cleaning of frequent contact surfaces as well as terminal cleaning upon discharge. See Appendix B.	recommended contact time. Attention must be given to thorough daily cleaning of frequent contact surfaces as well as terminal cleaning upon discharge. See Appendix B.	of prompt cleaning and disinfecting of bathroom and other environmental surfaces that may become contaminated with fecal material or other patient secretions/ excretions.	the importance of prompt cleaning and disinfecting of bathroom and other environmental surfaces that may become contaminated with fecal material or other patient secretions/ excretions.	

<sup>\*</sup>VRE has been found to survive on environmental surfaces for prolonged periods and linked to transmission/outbreaks.

	Guidelines for Management of MRSA/VRE Infections						
Ambulatory Care Setting (i.e., Dialysis Settings, Clinics and Outpatient Day Surgery)	Ambulatory Care Setting (i.e., Dialysis Settings, Clinics and Outpatient Day Surgery)	Ambulatory Care Setting (i.e., Dialysis Settings, Clinics and Outpatient Day Surgery)	Ambulatory Care Setting (i.e., Dialysis Settings, Clinics and Outpatient Day Surgery)	Ambulatory Care Setting (i.e., Dialysis Settings, Clinics and Outpatient Day Surgery)	Other (i.e., Schools, Day Care, Assisted Living, Adult Day-Care Center, etc.)		
		Surveillance/Scr	eening Cultures*				
Termination of Precautions/Isolation: Relatively stringent criteria should be used for terminating precautions because colonization can persist indefinitely. Assume colonization until culture negative results on at least three (3) consecutive occasions, one or more weeks apart, when off antibiotics for at least 48 hours. Take cultures from	Termination of Precautions/Isolation: Relatively stringent criteria should be used for terminating precautions because colonization can persist indefinitely. Assume colonization until culture negative results on at least three (3) consecutive occasions, one or more weeks apart, when off antibiotics for at least 48 hours. Take cultures from	Termination of Precautions/Isolation: Relatively stringent criteria should be used for terminating precautions because colonization can persist indefinitely. Assume colonization until culture negative results on at least three (3) consecutive occasions, one or more weeks apart, when off antibiotics for at least 48 hours. Take cultures from	Termination of Precautions/Isolation: Relatively stringent criteria should be used for terminating precautions because colonization can persist indefinitely. Assume colonization until culture negative results on at least three (3) consecutive occasions, one or more weeks apart, when off antibiotics for at least 48 hours. Take cultures from	Termination of Precautions/Isolation: Relatively stringent criteria should be used for terminating precautions because colonization can persist indefinitely. Assume colonization until culture negative results on at least three (3) consecutive occasions, one or more weeks apart, when off antibiotics for at least 48 hours. Take cultures from	No outhering		
multiple body sites. See Appendix C.	No culturing necessary.						

<sup>\*</sup>This should be done only on consultation with infection-control experts.

Guidelines for Management of MRSA/VRE Infections						
		Ambulatory Care	Communal Care		Other	
	Long-Term Care	Setting	Setting		(i.e., Schools,	
	(i.e., Long-Term	(i.e., Dialysis	(i.e., Open Ward,		Day Care,	
	Care Facilities,	Settings, Clinics	Mental Health		Assisted Living,	
	Rehab Centers,	and Outpatient	and Chemical		Adult Day-Care	
Acute Care	Swing Bed Units)	Day Surgery)	Dependency)	Home Care	Center, etc.)	
The length of	The length of	The length of	The length of	The length of		
colonization is	colonization is	colonization is	colonization is	colonization is		
expected to be	expected to be	expected to be	expected to be	expected to be		
prolonged, i.e., half	prolonged, i.e., half life					
life of colonization for	of colonization for	of colonization for	of colonization for	of colonization for		
MRSA is 40 months.	MRSA is 40 months.	MRSA is 40 months.	MRSA is 40 months.	MRSA is 40 months.		
There are no	There are no	There are no	There are no	There are no		
established guidelines	established guidelines	established guidelines	established guidelines	established guidelines		
for how often cultures	for how often cultures	for how often cultures	for how often cultures	for how often cultures		
are done to assess	are done to assess	are done to assess	are done to assess	are done to assess		
colonization. Cultures	colonization. Cultures	colonization. Cultures	colonization. Cultures	colonization. Cultures		
may be indicted if	may be indicted if	may be indicted if	may be indicted if	may be indicted if		
invasive procedures	invasive procedures	invasive procedures	invasive procedures	invasive procedures		
are planned or the	are planned or the	are planned or the	are planned or the	are planned or the		
person is moved to an	person is moved to an	person is moved to an	person is moved to an	person is moved to an		
institutional setting.	institutional setting.	institutional setting.	institutional setting.	institutional setting.		

	Guidelines for Management of MRSA/VRE Infections						
		Ambulatory Care	Communal Care		Other		
	Long-Term Care	Setting	Setting		(i.e., Schools,		
	(i.e., Long-Term	(i.e., Dialysis	(i.e., Open Ward,		Day Care,		
	Care Facilities,	Settings, Clinics	Mental Health		Assisted Living,		
	Rehab Centers,	and Outpatient	and Chemical		Adult Day-Care		
Acute Care	Swing Bed Units)	Day Surgery)	Dependency)	Home Care	Center, etc.)		
Screening on	Screening on	Screening on	Screening on	Screening on			
Admission:	Admission:	Admission:	Admission:	Admission:			
Screening on	Screening on	Screening on	Screening on	Screening on			
admission for drug	admission for drug	admission for drug	admission for drug	admission for drug			
resistant organisms	resistant organisms	resistant organisms	resistant organisms	resistant organisms			
(MRSA/VRE) may be	(MRSA/VRE) may be	(MRSA/VRE) may be	(MRSA/VRE) may be	(MRSA/VRE) may be			
recommended for	recommended for	recommended for	recommended for	recommended for			
individual patient	individual patient	individual patient	individual patient	individual patient			
situations (e.g.,	situations (e.g.,	situations (e.g.,	situations (e.g.,	situations (e.g.,			
transfer from large	transfer from large	transfer from large	transfer from large	transfer from large			
tertiary facilities with	tertiary facilities with	tertiary facilities with	tertiary facilities with	tertiary facilities with			
known drug	known drug resistance	known drug resistance	known drug resistance	known drug resistance			
resistance and/or	and/or patient with	and/or patient with	and/or patient with	and/or patient with			
patient with multiple	multiple invasive sites	multiple invasive sites	multiple invasive sites	multiple invasive sites			
invasive sites or in	or in outbreak	or in outbreak	or in outbreak	or in outbreak			
outbreak situations.)	situations.)	situations.)	situations.)	situations.)			
Refer to Appendix C.	Refer to Appendix C.	Refer to Appendix C.	Refer to Appendix C.	Refer to Appendix C.	No culturing necessary.		
Screening on	Screening on	Screening on	Screening on	Screening on			
Discharge:	Discharge:	Discharge:	Discharge:	<u>Discharge</u> :			
Routine screening is	Routine screening is	Routine screening is	Routine screening is	Routine screening is			
not recommended	not recommended on	not recommended on	not recommended on	not recommended on			
on discharge/transfer	discharge/transfer	discharge/transfer	discharge/transfer	discharge/transfer			
unless indicated in	unless indicated in	unless indicated in	unless indicated in	unless indicated in			
outbreak situations.	outbreak situations.	outbreak situations.	outbreak situations.	outbreak situations.	No culturing necessary.		

	Guidelines for Management of MRSA/VRE Infections						
		Ambulatory Care	Communal Care		Other		
	Long-Term Care	Setting	Setting		(i.e., Schools,		
	(i.e., Long-Term	(i.e., Dialysis	(i.e., Open Ward,		Day Care,		
	, · · · · ·	` '	Mental Health				
	Care Facilities,	Settings, Clinics			Assisted Living,		
	Rehab Centers,	and Outpatient	and Chemical		Adult Day-Care		
Acute Care	Swing Bed Units)	Day Surgery)	Dependency)	Home Care	Center, etc.)		
Additional							
Screening:							
When VRE positive	Additional Screening:	Additional Screening:	Additional Screening:	Additional Screening:			
individuals have been	When VRE positive	When VRE positive	When VRE positive	When VRE positive			
newly identified,	individuals have been	individuals have been	individuals have been	individuals have been			
decisions to culture	newly identified,	newly identified,	newly identified,	newly identified,			
roommates should be	decisions to culture	decisions to culture	decisions to culture	decisions to culture			
made on a case by	roommates should be	roommates should be	roommates should be	roommates should be			
case basis,	made on a case by	made on a case by	made on a case by	made on a case by			
considering the	case basis, considering	case basis, considering	case basis, considering	case basis, considering			
potential for	the potential for	the potential for	the potential for	the potential for	NIIta-unio		
transmission.	transmission.	transmission.	transmission.	transmission.	No culturing necessary.		
In an outbreak	In an outbreak	In an outbreak	In an outbreak	In an outbreak			
situation, consult with	situation, consult with	situation, consult with	situation, consult with	situation, consult with			
an infection control	an infection control	an infection control	an infection control	an infection control			
practitioner and the ND Department of	practitioner and the ND Department of Health,	practitioner and the ND Department of Health,	practitioner and the ND Department of Health,	practitioner and the ND Department of Health,			
Health, Division of	Division of Disease	Division of Disease	Division of Disease	Division of Disease			
Disease Control.	Control.	Control.	Control.	Control.			
Refer to Appendix C.	Refer to Appendix C.	Refer to Appendix C.	Refer to Appendix C.	Refer to Appendix C.			
Some tertiary care	Some tertiary care	Some tertiary care	Some tertiary care	read to Appendix O.			
medical centers and	medical centers and	medical centers and	medical centers and				
other hospitals that	other hospitals that	other hospitals that	other hospitals that				
have many critically-	have many critically-ill	have many critically-ill	have many critically-ill				
ill patients at high risk	patients at high risk for	patients at high risk for	patients at high risk for				
for VRE may choose	VRE may choose to	VRE may choose to	VRE may choose to				
to conduct periodic	conduct periodic	conduct periodic	conduct periodic				
culture surveys of	culture surveys of stool	culture surveys of stool	culture surveys of stool				
stool or rectal swabs	or rectal swabs of such	or rectal swabs of such	or rectal swabs of such				
of such patients.	patients.	patients.	patients.		No culturing necessary.		

Guidelines for Management of MRSA/VRE Infections						
		<b>Ambulatory Care</b>	Communal Care		Other	
	Long-Term Care	Setting	Setting		(i.e., Schools,	
	(i.e., Long-Term	(i.e., Dialysis	(i.e., Open Ward,		Day Care,	
	Care Facilities,	Settings, Clinics	Mental Health		Assisted Living,	
	1	•	and Chemical		•	
A - 1- 0	Rehab Centers,	and Outpatient			Adult Day-Care	
Acute Care	Swing Bed Units)	Day Surgery)	Dependency)	Home Care	Center, etc.)	
Culturing of						
Employees:	Culturing of	Culturing of	Culturing of	Culturing of		
Culturing of	Employees:	Employees:	Employees:	Employees:		
employees is <b>not</b>	Culturing of employees	Culturing of employees	Culturing of employees	Culturing of employees		
indicated unless	is <b>not indicated</b> unless	is <b>not indicated</b> unless	is <b>not indicated</b> unless	is <b>not indicated</b> unless		
epidemiologically-	epidemiologically-	epidemiologically-	epidemiologically-	epidemiologically-		
linked to transmission	linked to transmission	linked to transmission	linked to transmission	linked to transmission		
in an outbreak	in an outbreak	in an outbreak	in an outbreak	in an outbreak		
situation.	situation.	situation.	situation.	situation.	No culturing necessary.	
<u>Environmental</u>						
Culturing: Some	<u>Environmental</u>	<b>Environmental</b>	<u>Environmental</u>			
care facilities may	<u>Culturing:</u> Some care	<b>Culturing:</b> Some care	Culturing: Some care			
elect to perform	facilities may elect to	facilities may elect to	facilities may elect to			
focused	perform focused	perform focused	perform focused			
environmental	environmental cultures	environmental cultures	environmental cultures			
cultures before and	before and after	before and after	before and after	Environmental	Environmental	
after cleaning rooms	cleaning rooms that	cleaning rooms that	cleaning rooms that	culturing is not	culturing is not	
that housed VRE-	housed VRE-positive	housed VRE-positive	housed VRE-positive	practical in the home	practical in these	
positive patients.	patients.	patients.	patients.	environment.	settings.	

	Guidelines for Management of MRSA/VRE Infections						
	Long-Term Care (i.e., Long-Term	Ambulatory Care Setting (i.e., Dialysis	Communal Care Setting (i.e., Open Ward,		Other (i.e., Schools, Day Care,		
	Care Facilities, Rehab Centers,	Settings, Clinics and Outpatient	Mental Health and Chemical		Assisted Living, Adult Day-Care		
Acute Care	Swing Bed Units)	Day Surgery)	Dependency)	Home Care	Center, etc.)		
If a facility chooses	If a facility chooses to	If a facility chooses to	If a facility chooses to				
to perform such	perform such	perform such	perform such				
environmental	environmental	environmental	environmental				
culturing, it should	culturing, it should be	culturing, it should be	culturing, it should be				
be done only under	done only under the	done only under the	done only under the				
the supervision of	supervision of	supervision of	supervision of				
infection control staff	infection control staff	infection control staff	infection control staff				
in that facility and in	in that facility and in	in that facility and in	in that facility and in				
collaboration with the	collaboration with the	collaboration with the	collaboration with the				
clinical microbiology	clinical microbiology	clinical microbiology	clinical microbiology				
laboratory. Refer to	laboratory. Refer to	laboratory. Refer to	laboratory. Refer to				
Appendix C.	Appendix C.	Appendix C.	Appendix C.				

Guidelines for Management of MRSA/VRE Infections					
Acute Care	Long-Term Care (i.e., Long-Term Care Facilities, Rehab Centers, Swing Bed Units)	Ambulatory Care Setting (i.e., Dialysis Settings, Clinics and Outpatient Day Surgery)	Communal Care Setting (i.e., Open Ward, Mental Health and Chemical Dependency)	Home Care	Other (i.e., Schools, Day Care, Assisted Living, Adult Day-Care Center, etc.)
	Communi	cation on Transfer/	Discharge/Readmis	sion Issues	
Known status of drug resistant organisms (VRE/MRSA) should be indicated verbally and in writing on transfer sheet. Because persons can be colonized for a long period of time, a system should be established for highlighting records of infected or colonized persons in order to promptly identify and initiate precautions on readmission. Ideally this information should be computerized within an facility so that precautions will not be delayed due to unavailability of the person's medical record.  Transporting services (i.e. medivans, ambulances) must be informed of resistant organisms. See Appendix D.	Known status of drug resistant organisms (VRE/MRSA) should be indicated verbally and in writing on transfer sheet. Because persons can be colonized for a long period of time, a system should be established for highlighting records of infected or colonized persons in order to promptly identify and initiate precautions on readmission. Ideally this information should be computerized within an facility so that precautions will not be delayed due to unavailability of the person's medical record.  Transporting services (i.e. medivans, ambulances) must be informed of resistant organisms. See Appendix D.	Known status of drug resistant organisms (VRE/MRSA) should be indicated verbally and in writing on transfer sheet. Because persons can be colonized for a long period of time, a system should be established for highlighting records of infected or colonized persons in order to promptly identify and initiate precautions on readmission. Ideally this information should be computerized within an facility so that precautions will not be delayed due to unavailability of the person's medical record.  Transporting services (i.e. medivans, ambulances) must be informed of resistant organisms. See Appendix D.	Known status of drug resistant organisms (VRE/MRSA) should be indicated verbally and in writing on transfer sheet. Because persons can be colonized for a long period of time, a system should be established for highlighting records of infected or colonized persons in order to promptly identify and initiate precautions on readmission. Ideally this information should be computerized within an facility so that precautions will not be delayed due to unavailability of the person's medical record.  Transporting services (i.e. medivans, ambulances) must be informed of resistant organisms. See Appendix D.	Known status of drug resistant organisms (VRE/MRSA) should be indicated verbally and in writing on transfer sheet. Because persons can be colonized for a long period of time, a system should be established for highlighting records of infected or colonized persons in order to promptly identify and initiate precautions on readmission. Ideally this information should be computerized within an facility so that precautions will not be delayed due to unavailability of the person's medical record.  Transporting services (i.e. medivans, ambulances) must be informed of resistant organisms. See Appendix D.	All direct care providers must use appropriate precautions.

Guidelines for Management of MRSA/VRE Infections						
		<b>Ambulatory Care</b>	Communal Care		Other	
	Long-Term Care	Setting	Setting		(i.e., Schools,	
	(i.e., Long-Term	(i.e., Dialysis	(i.e., Open Ward,		Day Care,	
	Care Facilities.	Settings, Clinics	Mental Health		Assisted Living,	
	Rehab Centers,	and Outpatient	and Chemical		Adult Day-Care	
Acute Care	Swing Bed Units)	Day Surgery)	Dependency)	Home Care	Center, etc.)	
Colonization or	Colonization or	Colonization or	Colonization or	Colonization or		
infection with a DRO	infection with a DRO	infection with a DRO	infection with a DRO	infection with a DRO		
(Drug Resistant	(Drug Resistant	(Drug Resistant	(Drug Resistant	(Drug Resistant		
Organism i.e.,	Organism i.e.,	Organism i.e.,	Organism i.e.,	Organism i.e.,		
MRSA/VRE) should	MRSA/VRE) should	MRSA/VRE) should	MRSA/VRE) should	MRSA/VRE) should		
not be a barrier to	not be a barrier to	not be a barrier to	not be a barrier to	not be a barrier to		
admission or	admission or	admission or	admission or	admission or		
transfer. Every effort	transfer. Every effort	transfer. Every effort	transfer. Every effort	transfer. Every effort		
should be made to	should be made to	should be made to	should be made to	should be made to		
place person in	place person in	place person in	place person in	place person in		
appropriate settings.	appropriate settings.	appropriate settings.	appropriate settings.	appropriate settings.		

Refusal to accept patients on the basis of infectious disease or medical conditions may be in violation of the American with Disabilities Act.